48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Friends of John Delaney]	
ADDRESS (number and street) PO Box 70835					1	
CITY, STATE, and ZIP CODE					-	
Bethesda			MD 208	13		
NAME OF CANDIDATE John K. Delaney		3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION NUMBER		
		House	MD 06	C00508416		
5. ISTHIS AN AMENDMENT? NO, THIS IS A	NEW FIL	ING	YES, IT AMENDS THE	NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month,	Amount
Adam Bernstein			The Bernstein Com	panies	day, year)	
3299 K St NW					04/11/2016	1000.00
3299 K 31 NW			Transaction ID : C2	21734052		
			Occupation			
Washington	DC	20007-4415	Real Estate			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month, day, year)	Amount
Don Bowman			DM Bowman Inc.			
10702 Hopewell Rd					04/11/2016	2700.00
10702 Hopewell Nu			Transaction ID : C21734450			
NACIL: a read on a set		04705 4047	Occupation			
Williamsport	MD	21795-4047	Chairman			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month, day, year)	Amount
Don Bowman			DM Bowman Inc.			
10702 Hopewell Rd					04/11/2016	2300.00
			Transaction ID : C2	21734415		
AACH		04705 4047	Occupation			
Williamsport	MD	21795-4047	Chairman			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month, day, year)	Amount
Mr. Richard Ingram			None		0.4/4.0/004.0	1000.00
12017 Gregerscroft Rd					04/12/2016	1000.00
3			Transaction ID : C2	21734765		
_			Occupation			
Potomac	MD	20854-2148	Retired			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month, day, year)	Amount
Mr. Mark Jacobsen			Promontory Interfin	ancial Network	0.4/4.4/00.40	0700 00
6800 Hillmead Rd					04/11/2016	2700.00
			Transaction ID : C2	21734051		
Bethesda	MD	20817-3026	Occupation banking services			
SIGNATURE (optional)			DATE		For further i	nformation contact:
April Delaney			[Electronically Filed] 04/13/2016		Federal Election Commission 999 E Street, NW, Washington, DC 20463	
						-9530, Local 202-694-1100



Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.



Image# 201604139012320321 PAGE 2 / 2

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Friends of John Delaney			1	
ADDRESS (number and street) PO Box 7083	5		-	
. o 20x 1000				
CITY, STATE, and ZIP CODE				1 2000
Bethesda		MD 20813	continuation page	
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER	
John K. Delaney		House MD 06	C00508416	
5. ISTHIS AN AMENDMENT? NO, THIS IS	S A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON		
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
H Daniel Jobe		Capitol Cadillac Co	day, year)	
			04/12/2016	1000.00
6500 Capitol Dr				
		Transaction ID : C21734420 Occupation		
Greenbelt	MD 20770-3205	Automotive		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
Ms. Darina McKelvie		N/A	day, year)	
ivis. Dariria ivicitervie		IVA	04/11/2016	1000.00
3901 Fordham Road, NW			04/11/2010	1000.00
		Transaction ID : C21734414		
Machinetes	DO 20016	Occupation		
Washington	DC 20016	Attorney		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
			day, your,	
		Occupation		
		Cocapanon		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
			day, year)	
		Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
E. I GEL MAINE, MAILING ADDRESS AND ZIP CODE		Name of Employer	day, year)	
		Occupation		